## SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:					PAGE 1680 OF			2	2428	
	(check only one)									
	X	11a		11b		11c		12		
		13		14		15		16		17

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or for commercial purposes, other than using	the name and address of any political committee to	solicit contributions from such committee.		
NAME OF COMMITTEE (In Full) REPUBLICAN NATIONAL CO	OMMITTEE			
Full Name (Last, First, Middle Initial)  DR. WILLIAM H. SIMON  Mailing Address 1313 PARTRIDGE LANE	Date of Receipt			
City VILLANOVA	State Zip Code PA 19085-1922	05 29 2015 Transaction ID : 2015M06L11Al05011		
FEC ID number of contributing federal political committee.	C 19065-1922	Amount of Each Receipt this Period  250.00		
Name of Employer  SELF-EMPLOYED  Receipt For:  Primary General  Other (specify)	Occupation PHYSICIAN  Aggregate Year-to-Date ▼  500.00			
Full Name (Last, First, Middle Initial)  MR. ROBERT T. SIMON  Mailing Address 325 N. CAUSEWAY  APARTMENT C402  City  NEW SMYRNA BEACH  FEC ID number of contributing federal political committee.  Name of Employer RETIRED	State Zip Code FL 32169-5288  C Occupation RETIRED	Date of Receipt  05		
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  280.00			
Full Name (Last, First, Middle Initial)  MS. GLORIA O. SIMON  Mailing Address 137 JULIE DRIVE  City  GLENVIEW	State Zip Code IL 60025-4875	Date of Receipt  05 14 2015  Transaction ID: 2015M06L11AI05013  Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.  Name of Employer  RETIRED  Receipt For:  Primary General  Other (specify)	Occupation RETIRED  Aggregate Year-to-Date ▼  285.00	235.00		
SUBTOTAL of Receipts This Page (optional)	•	715.00		
TOTAL This Period (last page this line numb	er only)			